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CONFIRMATION NO. 7130

<b>SERIAL NUMBER</b> 10/754,010	<b>FILING OR 371(c) DATE</b> 01/08/2004 <b>RULE</b>	<b>CLASS</b> 707	<b>GROUP ART UNIT</b> 2167	<b>ATTORNEY DOCKET NO.</b> ROC920030366US1	
<b>APPLICANTS</b> Paul Reuben day, Rochester, MN; Brian Robert Muras, Rochester, MN; Anne Marie Ryg, Mantorville, MN;					
<b>** CONTINUING DATA *****</b> <i>No KML</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>No KML</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/12/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Hummingbird Lovel</i> <i>KML</i> Acknowledged Examiner's signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 30206					
<b>TITLE</b> Method and system for a self-healing query access plan					
<b>FILING FEE RECEIVED</b> 1046	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		